

So at some point it is going to be very easy to take the step of using that information and making cost comparisons. So...

SENATOR HIGGINS: Oh, I see. All we're actually voting on is that...it's like the insurance companies, we used to always have...each company had their own claim form to fill out. Now they have what they call the ACCORD form, each one has the same questions in the same place. This would only make it so that insurance companies, when they look at a bill, if the hospital bill for XYZ, it would be the same on every form. Is that correct?

SENATOR WESELY: Yes. The bill that would be sent to the insurance company from the hospital would always be the same form, so that they'd have the same form every time for that insurance company and all insurance companies, the Medicare program and (inaudible).

SENATOR HIGGINS: So it really is a bill that is going to help the insurance companies in the long run.

SENATOR WESELY: And the hospitals in terms of the uniformity and using the same form it is a lot easier to do that.

SENATOR HIGGINS: Will they be covering...can you give me an example of the information they are going to put on these forms?

SENATOR WESELY: Well, they will show what the individual came in for, what the diagnosis was and what was performed, what services were provided, and what the charges were. They'd all use the same codes across the board. See they've developed this for the federal government now, over a period of time. The UB82 was adopted in 1982 for the federal government. So it's been around awhile. It is an agreed to form.

SENATOR HIGGINS: So, eventually, if I understand you right, the Health Department would be able to sort out and show where hospital A maybe was running \$400 more for an appendectomy than hospital B.

SENATOR WESELY: That's the ultimate goal, is to be able to make that comparison, yes.